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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

09975317

CLAIMS AS FIL				(Column 1) (Column 2)				SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY					
TOTAL CLAIMS			20				F	ATE	FEE	1	RATE	FEE				
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	370.00	OR	BASIC FEE	740.00				
TOTAL CHARGEABLE CLAIMS			20 minus 20=		*		\rightarrow	(\$ 9=		OR	X\$18=	(
INDEPENDENT CLAIMS			2 minus 3 =		*		>	(42=	,	OR	X84=)				
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				+	140=		OR	+280=					
* If	the difference	in column 1 is	less than ze	ero, ente	r "0" in column 2		L	OTAL		OR	TOTAL	740				
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (C						(Column 3)	SI	MALL I	ENTITY	OR	OTHER SMALL	THAN				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
	Total	· 24	Minus	** 8	0	= 4	X	\$ 9=		OR	X\$18=	7200				
	Independent	* 6	Minus	***	3	= 3	×	(42=		OR	X84=	2520				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+	140=		OR	+280=					
								TOTAL IT. FEE		OD	TOTAL ADDIT. FEE	3240				
		(Column 1)			mn 2)	(Column 3)	AUL	/II. FEE			ADDIT. I EE					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=					
	Independent	*	Minus	***	T 01 A114	=	×	(42=	:	OR	X84=					
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM		+	140=		OR	+280=					
							<u> </u>	TOTAL IT. FEE			TOTAL ADDIT. FEE					
		(Column 1)		(Colu	mn 2)	(Column 3)	ADD) I. FEE I			AUUII. FEEI					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST 1BER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=					
	Independent	*	Minus	***		=	X	42=	·	OR	X84=					
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM						+280=					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL					
	If the "Highest Nu	mber Previously F	aid For" IN TH	IS SPACE	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											